



Clinical Edit Criteria Proposal

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Drug/Drug Class: Date: Prepared for:		BiDil® Oral Disintegrating Tablets Clinical Edit August 24, 2006		
Prepared by:		Missouri Medicaid		
New Criteria			Revision of I	Existing Criteria
Executive Summary				
Purpose:	Ensure appropriate utilization and control of BiDil [©] (isosorbide dinitrate 20mg/hydralazine HCl 37.5mg tablets).			
Why was this Issue Selected:	BiDil® is a branded drug product containing isosorbide dinitrate and hydralazine hydrochloride in a fixed-dose combination tablet. Isosorbide dinitrate is a vasodilator with effects on both arteries and veins, while hydralazine hydrochloride predominantly works as an arterial vasodilator. BiDil® is indicated for the treatment of heart failure as an adjunct to standard therapy in self-identified black patients to improve survival, prolong time to hospitalization for heart failure, and to improve patient-reported functional status. Standard therapy generally includes a loop diuretic, ACE inhibitor or ARB, along with a beta blocker. Many patients also receive a cardiac glycoside or an aldosterone antagonist. Bidil® contains 20mg of isosorbide dinitrate and 37.5mg hydralazine hydrochloride. Generic forms of each are individually available in oral tablets at significant lower costs of therapy. The fixed-dose combination dosage form is roughly 4 times more expensive than the MAC'd oral generic products.			
Program-		Drug	Dosage Form	Cost per Dosage Form
specific information:	• BiDil	®	20mg/37.5mg tab	\$1.80WAC
Setting & Population:	All patie	ents.		
Type of Criteria:	☐ Incre	eased risk of ADE	☐ Non-Pre	eferred Agent
	⊠ Appr	opriate Indications		

Data Sources: ☐ Only administrative ☐ Databases + Prescriber-supplied

Setting & Population

Drug for review: BiDil[®] (isosorbide dinitrate 20mg/hydralazine HCl 37.5mg tablets)

Age range: All ages

Gender: Male and female

Approval Criteria

• Patient race = African American

- Trial and failure of each individual generic active ingredients in the past 45 days.
- Documented ADE/ADR to individual generic products.

Denial Criteria

Failure to meet approval criteria.

References

- 1. Facts and Comparisons, p.451 466h. 2005.
- 2. USPDI, Micromedex, 2005.
- 3. NitroMed, Inc., AMCP Formulary Submission Dossier BiDil[®], Lexington, MA 02421. August 2005.

